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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/680,549	10/07/2003	Kamal Jain	M1103.70141US00	5005
45840 WOLF GREEN	7590 07/10/200 NFIELD (Microsoft Co	EXAMINER		
C/O WOLF, G	REENFIELD & SACK		AJIBADE AKONAI, OLUMIDE	
600 ATLANTIC AVENUE BOSTON, MA 02210-2206		.*	ART UNIT	PAPER NUMBER
,			2617	,
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			MAIL DATE	DELIVERY MODE
			07/10/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

	Application No.	Applicant(s)				
Interview Summary	10/680,549	JAIN ET AL.				
morrion cumually	Examiner	Art Unit				
	Olumide T. Ajibade-Akonai	2617				
All participants (applicant, applicant's representative, PTO personnel):						
(1) <u>Olumide T. Ajibade-Akonai</u> .	(3) Jeffrey C. O'Neill.					
(2) <u>Scott Gerwin</u> .	(4)					
Date of Interview: 26 June 2007.						
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	e) ☐ applicant's representative	e]				
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.					
Claim(s) discussed: 1.						
Identification of prior art discussed: <u>Chow 6,771,966</u> .						
Agreement with respect to the claims f)☐ was reached. g)⊠ was not reached. h)□ N	I/A.				
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Applicant's representative discussed differences between the Examiner's prior art and the Applicant's invention. Examiner will consider Applicant's remarks and/or comments when a response is officially submitted.</u>						
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w					
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTERQUIREMENTS on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APPI Y DAYS FROM T WHICHEVER IS	LICANT IS HIS			
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Everyings Note: You must sign this form unless it is as	A	10				
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's sign	ature, if required				

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